
Kentucky's Prevention Framework

Adoption of a common prevention framework is a major element of the Strategy. Kentucky's framework is illustrated on the attached page. This paper will provide a brief explanation of the framework and suggest possible uses.

What Is a Prevention Framework?

A prevention framework is a conceptualization of the process of substance abuse prevention. Prevention, by its very nature, aims at behaviors that have not yet occurred. Therefore, prevention efforts must target conditions that make these behaviors more or less likely to occur. A prevention framework identifies a number of important factors that contribute to the behavior that is to be prevented, and illustrates how these factors interact and influence one another.

How Is a Prevention Framework Used?

Persons utilizing the same conceptual framework share a common understanding of the objectives of prevention programming. Persons from various professional and experiential backgrounds begin to "speak the same language" when discussing prevention strategies. A shared vocabulary facilitates clear communication, a basic requirement of effective collaboration.

The framework provides a model of a comprehensive approach to prevention. Prevention program developers can use the model to guide discussions of specific strategies. Seeing where each proposed activity fits within the prevention framework helps to keep planners focused on the overall vision of a comprehensive approach. To this end, the model helps planners to integrate program components so that they support each other. Examining the various elements of the framework also helps planners identify program elements that may have been overlooked.

The Graphic Illustration

Kentucky's prevention framework is depicted in the graphic illustration attached to this document (see p. 35). An explanation of the framework follows.

Elements of the Framework

A basic explanation of each element of the framework is provided below.

Youth use of alcohol, tobacco and other drugs (ATOD)

This element is found in the oval shape toward the bottom center of the framework. Youth ATOD use is the behavior prevention activities seek to prevent. All other elements in the framework focus on this target, either directly or indirectly through their effect on other elements. Thus, the framework illustrates the "bottom line" in assessing the success of prevention efforts--i.e., did they have an effect on the rates of ATOD use within the targeted population?

Consequences

This box at the bottom of the framework lists a few examples of societal problems resulting from ATOD use. These consequences are highlighted to remind policy makers of why government dollars are allocated for efforts to reduce youth substance abuse--to diminish the problems stemming from this behavior. Focusing on consequences has strong implications for prevention program design. If

planners wish to see a reduction of problems as a result of their prevention efforts, they first need to identify the specific ATOD patterns of use that appear to be associated with those problems. For example, youth who engage in a pattern of heavy party drinking on weekends generally run more of a risk of accidental injuries than youth who take a single drink in their own homes every once in a while. While the prevention program would not want to condone any level of drinking by youth, it may choose to focus efforts on preventing heavy drinking because of its link to negative consequences. The program would then want to select messages and strategies aimed at reducing heavy drinking, which would be quite different from strategies that might be employed to convince light drinkers to abstain. Utilizing the framework, then, helps policy makers identify which negative consequences (if any) they wish to reduce, target the specific ATOD use behaviors responsible for those consequences, and select the most appropriate strategies.

Supply and Demand

Supply and demand influences are represented by the three large arrows pointing at the oval that represents alcohol, tobacco and other drug use. The most effective prevention strategies are tailored to address both supply and demand. The other elements of the Strategy are arranged to show their effect on supply and/or demand.

Community norms

This prevention framework places community norms--represented by the large diamond at the top of the page--in a central position. This illustrates the strength of community norms as an influence on youth ATOD use. Norms are commonly held beliefs, attitudes and behaviors that, in this case, express approval, disapproval, or tolerance of ATOD use. Norms vary according to the drug in question. Youth are likely to engage in ATOD use behaviors that are accepted (or at least tolerated) by the community. The framework illustrates how community norms affect both the supply and the demand for ATOD, as well as how supply and demand affect community norms.

ATOD availability to youth

This box in the lower left quadrant of the framework represents how available a particular drug is to youth--i.e., how easy it is for youth to obtain ATOD. Drug use is higher where drugs are readily available. Availability is viewed in the framework as a function of the other factors illustrated on the left side of the page and explained below.

Enforcement and regulation

Laws and community policies, represented in the box at the bottom left of the framework, are helpful in regulating the supply of ATOD to youth. The arrows that link this box and community norms illustrate the reciprocal influence between these two elements. Community attitudes can support or hinder policy efforts. On the other hand, effective policies can lead to changes in community attitudes and beliefs. Policies supported by the community are most likely to be effective in preventing ATOD use.

Retail (or illegal) availability of ATOD to youth

This refers to the sale of tobacco and alcohol to minors by community retail establishments and also to the illegal trafficking of other drugs. Arrows to and from this box show that the effectiveness of enforcement and regulatory efforts affects this factor, as does the overall community supply of particular drugs.

Social availability

Social availability is the extent to which a particular drug is available to youth within their social environment--at parties, from friends, family members, etc. As the framework illustrates, community norms exert the greatest influence on this factor. Overall community supply of the drug interacts with norms to increase or decrease social availability.

Overall community supply of ATOD

This box at the top left of the framework represents the overall availability of specific drugs in the community through drug trafficking, alcohol retail outlets, bootleggers, tobacco outlets, or any other source. This factor has an effect on community norms, as well as on the retail and social availability of ATOD to youth. Perhaps more important, community norms that encourage use of a particular drug support the easy availability of that drug in the community.

Risk and protective factors

The four shapes at the right side of the framework illustrate categories of risk and protective factors that might exist within a given community or within an identified group of youth. A large number of factors correlated with drug use have been identified by researchers in recent years. The predictive value of these factors--i.e., the extent to which they are believed to influence drug use--varies greatly. The prevention framework only illustrates the categories of factors. Some of the most important risk and protective factors that fall within these categories are identified in the sections below.

The arrows pointing back and forth between each of the risk factor categories and community norms illustrate the fact that these conditions have a strong influence on each other. Many of the risk and protective factors prevalent in a community result, in part, from community norms. For example, in communities where heavy drinking is viewed as an accepted and admired adult activity, individuals will tend to have the risk factor of attitudes favoring that behavior. On the other hand, individual attitudes favoring heavy drinking form the basis for community norms related to that behavior.

The demand arrow pointing from the risk and protective factors toward the oval representing youth use of alcohol, tobacco and other drugs illustrates the observation that some factors appear to increase the likelihood of ATOD use in a process not significantly moderated by community norms. For example, close supervision of adolescent activities by parents may serve as a protective factor even where youthful alcohol and drug use is generally tolerated in the community.

Community risk and protective factors

Formal and informal community policies implemented in a variety of community systems--the medical community, schools, social services agencies, law enforcement, and the media--have a strong influence on youth ATOD use. Effective policies communicate clear messages that discourage youth ATOD use. As with the other risk and protective factor categories, community risk and protective factors are influenced by norms and also influence the norms. Community policies are believed to be a very important area for prevention activity.

Family risk and protective factors

Certain family factors appear to have a strong influence on youth ATOD choices. A strong attachment to family appears to reduce the likelihood of drug problems, while high conflict within the family seems to increase that likelihood. On the other hand, parents who provide appropriate supervision of teen activities appear to assert a protective influence.

Individual risk and protective factors

Two specific beliefs and attitudes have been identified as predictive of ATOD use: the perception of risk associated with the use of a particular drug and the perception of social disapproval of using the drug. It is easy to see how community norms would have an effect on these individual beliefs and attitudes.

Other individual characteristics that place a person at high risk include a family history of alcohol and drug dependency, failure in school, and early and persistent antisocial behavior. Prevention program developers may identify groups of youth with these characteristics and plan specialized activities that address their particular needs.

Peer risk and protective factors

Association with ATOD using peers or having peers who are accepting of ATOD use constitutes a risk factor for youth. Prevention programs that seek to influence the norms in the general population or among an identified group of youth might positively change these peer attributes.

Conclusion

Although the framework presented here can serve as a guide for prevention efforts, the process of prevention is much too complex to be illustrated in a graphic model. Also, the explanation provided in this summary could be elaborated in much more detail. The preliminary framework presented here is likely to be modified and expanded as new data about risk and protective factors becomes available and preventionists learn more about the interactions among the factors. Through this process of evolution, the framework will continue to hold a central place within the Kentucky Youth Substance Abuse Prevention Strategy.

FRAMEWORK FOR PREVENTING YOUTH SUBSTANCE ABUSE

